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FROM:	Michael Bergman					
COMPANY:	Bergman & Song LLP					
PHONE:	(617) 868-8871					
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PAGES (Includi	ng Cover Sheet): 21 HARD COPY TO	FOLLOW:	YES	X_NO		
		SENT BY:	NIS	DATE/TIME:	42 22:52	
MESSAGE	:		/			
Docket	No.: -H0630-0003-P003					
	atent Application of: Robert J. HAL	ES				
1	ation No.: 09/897,429		rt Unit: 212	.3		
Filed:]	Filed: July 3, 2001 Examiner: Jason Scott PROCTOR			OR		
For: SYSTEM AND METHOD FOR NETWORK INFRASTRUCTURE						
MANA	GEMENT			· · · · · · · · · · · · · · · · · · ·		
Attachi	ments:					
1. Credit Card Payment Form PTO-2038 (1 p) (Charge \$1,110)						
2. Transmittal Form PTO/SB/21 (1 p)						
3. Fee Transmittal Form PTO/SB/17 (1 p)						
4. Request for Extension of Time (2 pp)						
5. Response to Office Action (16 pp)						

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PTO/SB/21 (09-08)
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		Application Number	09/897,429			
TRANSMITTAL		Filing Date	July 3, 2001			
FORM		First Named Inventor	Robert J. HALES			
		Art Unit	2123			
(to be used for all correspondence after initial filing)		Examiner Name	Jason Scott PROCTOR			
Total Number of Pages in This Submission		Attorney Docket Number	H0630-0003-P003			
		NCLOSURES (Check all	that apply)			
Fee Trans	smittal Form (1 p)	Drawing(s)	After Allowance communication to (TC)			
✓ cc	Form PTO-2038 (1 p)	Licensing-related Papers	Appeal Communication to Board of			
✓ Amendme	ent / Reply (16 pp)	Petition	Appeals and Interferences Appeal Communication to TC			
After Final		Petition to Convert to a	(Appeal Notice, Brief, Reply Brief) Proprietary Information			
Affidavits/declaration(s)		Provisional Application Power of Attorney, Revocation Change of Correspondence Ac	Status Letter			
Extension of Time Request (2 pp)		Terminal Disclaimer	Other Enclosure(s) (please identify			
Express Abandonment Request		Request for Refund	1. Facsimile Cover Sheet			
Information Disclosure Statement		CD, Number of CD(s)				
		Landscape Table on CD	_			
Certified Copy of Priority Document(s)						
Remark Reply to Missing Parts/		marks				
Incomplete Application						
Reply to Missing Parts under 37 CFR 1.52 or 1.53						
	OLONATI		MEN AD AACHT			
Firm Name)	IRE OF APPLICANT, ATTO	RNEY, OR AGENT			
Signature	Bergman & Song LLP, Custon	ner No. 64884	,			
Printed name	Michael Bergman	~~				
Date	FEB/0 2 2009)	Dog No. 42 249			
Date	LED/ 0 % 1003		Reg. No. 42,318			
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Effective on 12/08/2004.	Complete if Known							
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).	Application Number	09/897,429						
FEE TRANSMITTAL	Filing Date	July 3, 2001						
•	First Named Inventor	Robert J. HALES						
For FY 2007	Examiner Name	Jason Scott PROCTOR						
Applicant Claims small entity status. See 37 CFR 1.27	Art Unit	2123						
TOTAL AMOUNT OF PAYMENT (\$) 1,110.00	Attorney Docket No.	H0630-0003-P003						
METHOD OF PAYMENT (check all that apply)								
Check Credit Card Money Order None Other (please identify):								
✓ Deposit Account Deposit Account Number. 503950 Deposit Account Name: Bergman & Song LLP								
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charges fee(s) indicated below, except for the filling fee								
Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 Credit arry overpayments								
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FEE CALCULATION								
1. BASIC FILING, SEARCH, AND EXAMINATION FEES								
FILING FEES SEARCH FEES								
Small Entity Small En Application Type Fee (\$) Fee (\$) Fee (\$) Fee (\$)		all Entity						
Application Type Fee (\$) Fee (\$) Fee (\$) Utility	<u>Fee (\$)</u> <u>F</u>	Fee (\$) Fees Paid (\$)						
Design								
Plant		· · · · · · · · · · · · · · · · · · ·						
Reissue								
Provisional								
2. EXCESS CLAIM FEES		Small Entity						
Fee Description		Fee (\$) Fee (\$)						
Each claim over 20 (including Reissues)		155 101						
Each independent claim over 3 (including Reissues)								
Multiple dependent claims								
Total Claims Extra Claims Fee (\$) Fee Pair	<u>d (\$)</u>	Aultiple Dependent Claims						
- 20 or HP = x =		Fee (\$) Fee Paid (\$)						
HP = highest number of total dates paid for, if greater than 20.								
Indep. Claims Extra Claims Fee (\$) Fee Pair -3 or HP = x =	d (\$)							
HP = highest number of independent claims peid for, if greater than 3.								
3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (exclud-	If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer							
listings under 37 CFR 1.52(e)), the application size fee due is for small entity) for each additional 50								
sheets or fraction thereof. See 35 U.S.C. 41 (a)(1)(G) and 37 CFR 1.16(s).								
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)								
-100 = -100 /50 = (round up to a whole number) x = \$ 0.00								
4. OTHER FEE(S) Non-English Specification, fee (no small entity discount)								
Outor (e.g., pare more surcharge): 3 Mo. Ext. of Time: \$1,110	· · · · · · · · · · · · · · · · · · ·	\$ 1,110.00						
SUBWITTED BY								
Signature		Telephone 617.868.8870						
Name (Print/Type) Michae Bergman (Attorney/Age	#11)	Date FEB 0 2 2009						
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